

REQUEST FOR QUOTATION (THIS IS NOT AN ORDER)		THIS RFQ <input type="checkbox"/> IS <input checked="" type="checkbox"/> IS NOT A SMALL BUSINESS SET-ASIDE		PAGE 1 OF 2 PAGES		
1. REQUEST NO. SIZ10017Q0006		2. DATE ISSUED 11/07/2016		3. REQUISITION/PURCHASE REQUEST NO. PR5840190		
		4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1		RATING		
5a. ISSUED BY AMERICAN EMBASSY BAGHDAD AL KINDI STREET, INTERNATIONAL ZONE, ATTN: GSO/PROCUREMENT (BAGHDAD) BAGHDAD IRAQ				6. DELIVER BY (Date) 11/30/2016		
5b. FOR INFORMATION CALL (NO COLLECT CALLS)						
NAME Alaa M Yahya		TELEPHONE NUMBER AREA CODE NUMBER		7. DELIVERY <input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)		
				9. DESTINATION		
8. TO:				a. NAME OF CONSIGNEE AMERICAN EMBASSY BAGHDAD		
a. NAME		b. COMPANY		b. STREET ADDRESS AL KINDI STREET, INTERNATIONAL ZONE, ATTN: GSO/RECEIVING		
c. STREET ADDRESS				c. CITY BAGHDAD		
d. CITY		e. STATE	f. ZIP CODE	d. STATE	e. ZIP CODE	
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date) 11/15/2016 at/before 2:00 PM Local Time		IMPORTANT: This is a request for information and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5a. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or service. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotation must be completed by the quoter.				
11. SCHEDULE (Include applicable Federal, State and local taxes)						
ITEM NO. (a)	SUPPLIES/ SERVICES (b)		QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
	See Continuation to SF-18					
12. DISCOUNT FOR PROMPT PAYMENT			a. 10 CALENDAR DAYS (%)	b. 20 CALENDAR DAYS (%)	c. 30 CALENDAR DAYS (%)	d. CALENDAR DAYS NUMBER PERCENTAGE
NOTE: Additional provisions and representations <input type="checkbox"/> are <input type="checkbox"/> are not attached.						
13. NAME AND ADDRESS OF QUOTER			14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15. DATE OF QUOTATION	
a. NAME OF QUOTER						
b. STREET ADDRESS			16. SIGNER			
c. COUNTY			a. NAME (Type or print)		b. TELEPHONE AREA CODE	
d. CITY		e. STATE	f. ZIP CODE	c. TITLE (Type or print)	NUMBER	

11. SCHEDULE (Include applicable Federal, State and local taxes)					
ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
1	STANDARD PILLOW, MADE OF LATEX FOAM AND 100% COTTON	500	Each	0.00	0.00
2	STANDARD PILLOW CASE, WHITE	750	Each	0.00	0.00
3	FACE TOWELS, EXACTLY 13" X 13", WHITE, WITH DOBBY BORDER	600	Each	0.00	0.00
4	GOOD BRAND ELECTRIC KATTLE	200	Each	0.00	0.00
5	SHOWER CURTAIN, W/RING, 71 X 74, BEIGE COLOR	350	Each	0.00	0.00
6	BATH MAT, RUBBER, ANTI SLIP, BEIGE COLOR	350	Each	0.00	0.00
7	HAND TOWEL, 16" X 30", WHITE, WITH DOBBY BORDER	200	Each	0.00	0.00
8	BATH TOWEL, 27" X 54", WHITE, WITH DOBBY BORDER	200	Each	0.00	0.00
9	POT HOLDER, 8" X 8", WHITE, 6-PC/SET	300	Each	0.00	0.00
10	STANDARD PILLOW CASE, WHITE	1,000	Each	0.00	0.00
11	STANDARD PILLOW PROTECTOR, WHITE, WITH ZIP	600	Each	0.00	0.00
12	PYREX MEASUREMENT'S CUP, CLEAR GLASS	50	Each	0.00	0.00
13	TENSION ROAD, CURTAIN, 28-48" (71-122 CM)	300	Each	0.00	0.00

Note/ Kindly provide pictures for each item.